

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolosch & Birch, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37.CFR 1.16 and 1.17. ☒ Credit any overpayments

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | |
|-------------------------|-----------------|------------------------------|-----------------|------------------------------|------------------|------------------------------|-----------------------|
| <u>Application Type</u> | <u>Fee (\$)</u> | <u>Small Entity Fee (\$)</u> | <u>Fee (\$)</u> | <u>Small Entity Fee (\$)</u> | <u>Fee (\$)</u> | <u>Small Entity Fee (\$)</u> | <u>Fees Paid (\$)</u> |
| Utility | 310 | 155 | 510 | 255 | 210 | 105 | |
| Design | 210 | 105 | 100 | 50 | 130 | 65 | |
| Plant | 210 | 105 | 310 | 155 | 160 | 80 | |
| Reissue | 310 | 155 | 510 | 255 | 620 | 310 | |
| Provisional | 210 | 105 | 0 | 0 | 0 | 0 | |

Fee Description

| | | |
|----------------------------------------------------|-----|-----|
| Each claim over 20 (including Reissues) | 50 | 25 |
| Each independent claim over 3 (including Reissues) | 210 | 105 |
| Multiple dependent claims | 370 | 185 |

| | | | | |
|------------------------------------------------------------------------|---------------------|-----------------|----------------------|--------------------------------------|
| <u>Total Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Multiple Dependent Claims</u> |
| 18 | - 20 = | x | = | <u>Fee (\$)</u> <u>Fee Paid (\$)</u> |
| HP = highest number of total claims paid for, if greater than 20. | | | | |
| <u>Indep. Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | |
| 1 | - 3 = | x | = | |
| HP = highest number of independent claims paid for, if greater than 3. | | | | |

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| <u>Total Sheets</u> | <u>Extra Sheets</u> | <u>Number of each additional 50 or fraction thereof</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|---------------------|---------------------|---------------------------------------------------------|-----------------|----------------------|
| - 100 = | /50 = | (round up to a whole number) x | = | |

| | |
|-------------------------------------------------------------------------------------|--------|
| Non-English Specification, \$130 fee (no small entity discount) | |
| Other (e.g., late filing surcharge): 1251 Extension for response within first month | 120.00 |

| | | | |
|-------------------|--------------------------|-----------------------------------|----------------|
| SUBMITTED BY | | | |
| Signature | <i>R. A. Galt</i> #28781 | Registration No. (Attorney/Agent) | 32,181 |
| Name (Print/Type) | Marc S. Weiner | Telephone | (703) 205-8000 |
| | | Date | JUN 19 2008 |